



EAST SUPERIOR STREET ALMA, MICHIGAN 48801 TELEPHONE 517 463-1161 TWX 510 441-2431

PATRICK A. LINCOLN, P. E.

June 9, 1981

U. S. Environmental Protection Agency Region 5 Sites Notification Section Chicago, Illinois 60604

Gentlemen:

Enclosed are three notification forms EPA 8900-1 for our facilities as required by Section 103 (c) of the Comprehensive Environmental Response, Compensation and Liability Act of 1980.

One form covers former oily waste pits at our Alma, Michigan Refinery (MID 005358130). These pits were previously emptied of oily wastes and the material soil farmed on our land treatment site. The remaining residue will be removed and disposed in the same manner.

Another form for a former refinery site in Mt. Pleasant, Michigan is provided but may not be required. Clean-up and recovery of oils is continuing under direction of the Michigan Department of Natural Resources. Samples tested indicate the oily material at this site is <u>not</u> hazardous waste under RCRA.

The third form covers a former refinery site in Alma. Oily materials left from the 1966 shut-down are being removed for land farm treatment at our active facility. This operation is also under direction of the Michigan DNR and your Grosse Ile office.

Please contact me if you have any questions.

Very truly yours, Fatrish a Luciola

Patrick A. Lincoln

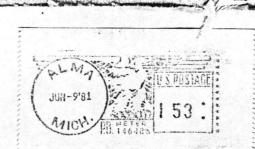
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TOTAL Total Petroleum, Inc.

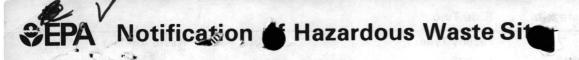
ALMA, MICHIGAN 48801

P28 4818293. MAIL

CERTIFIED MAIL
RETURN RECEIPT



U.S. Environmental Protection Agency Region 5 Sites Notification Section Chicago, Illinois 60604



United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compenhage in the Indicate the letter of the item

4	Person Required to Notify: Enter the name and address of the person or organization required to notify.		Name	Total	Petroleum, Inc.		
					perior Street		
			Street	Alma		Same MI Zin God	48801
	AND PARTY SERVICES AND	Provide Act	City	77TIIG	The second section of the secti	State Zip Cod	e sa
В	Site Location: Enter the common name (if known) and actual location of the site.		Name of Site	Total	Petroleum, Alma	Refinery	
			CINCING IN STATE	E. Sur	perior Street		
			Street	Alma	County Gratiot	. MI	48801
N	110005358130		City	- Arma	County	State Zip Cod	e
;	Person to Contact:		Name (Last, Fir	st and Title)	Lincoln, Patrick	Director of Env	vironmental
	Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.				(517) 463-1161	The Control of English States	Affair
			Phone		(317) 403 1101		
0	Dates of Waste Handling:						
	Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.		From (Year)	1936	To (Year) 1970		
	Waste Type: Choose the option you prefer to Option I: Select general waste types and source c you do not know the general waste types or source encouraged to describe the site in Item I—Descript		ource categor r sources, you	ies. If		is available to persons fain and Recovery Act (RCR	
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	neral Type of Waste: Ice an X in the appropriate Res. The categories listed boxes. Source of Waste: Place an X in the appropriate boxes.			Specific Type of Was EPA has assigned a folisted in the regulation appropriate four-digit the list of hazardous of contacting the EPA Re		f RCRA. Enter the vided. A copy of obtained by
	1. □ Organics 1. □ Mining			located.			
	2. ☐ Inorganics	2. □ Co	nstruction	- 1			-
	3. □ Solvents	3. □ Te	xtiles	100			
	4. ☐ Pesticides	4. □ Fe					
	5. ☐ Heavy metals	5. □ Pa	per/Printing				
	6. □ Acids		ather Tanning				
	7. Bases	7. 🗆 Iro	n/Steel Foun	dry			
	8. □ PCBs	8. 🗆 Ch	nemical, Gene	ral		-3	
	9. Mixed Municipal Waste		ating/Polishin				
	10. Unknown	10. □ M	ilitary/Ammu	nition			Y" EX.
	11. ☑ Other (Specify)		11. Electrical Conduction				
	Petroleum		ansformers				
			ility Companie		00000	5 JUN -981	
		14 0 00	-: tam. /D-f	Mark to the second second	11 11 11 7 6	1 1 1 1 1 - U X I	
			nitary/Refuse	9	00000	3 3017 3 01	
	sitiae il completione	15. 🗆 Ph	notofinish b/Hospital			3 3017 3 01	e serviced y

Form Approved OMB No. 2000-0138 EPA Form 8900-1

17.
Unknown 18. ☑ Other (Specify)

Petroleum Refining

	Notification of Hazardous Waste Site	Side Two					
F G	Waste Quantity: Place an X in the appropriate boxes to indicate the facility types found at the site. In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres. Known, Suspected or Likely Releases to Place an X in the appropriate boxes to indicate or likely releases of wastes to the environme	te any known, suspected,	otal Facility Waste Amount 6,400 gallons Total Facility Area square feet 6,400 acres □ Known □ Suspected □ Likely ☑ None				
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.						
Н	Sketch Map of Site Location: (Optional Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.						
ī	Description of Site: (Optional) Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.	Old heavy tank bottom pi for soil farm disposal.	ts were previously pumped out There are still 6 to 12 inches ove and dispose at soil farm.				
J	Signature and Title: The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".	Total Petroleum, Inc. Name Patrick A. Lincoln Street City State Signature Salinch G. State	□ Owner, Present □ Owner, Past □ Transporter □ Operator, Present				

Affair

REGION V INZARDOUS MATERIAL ENFORCEMENT AND RESPONSE PROGRAM

SITE NAME	TOTAL R	Jenery			
SITE ADDRES		Alma.	Mi.		
HOW/DATE ID	CHTIFIED	1 /	1 1 1 .		
SITE DESCRI	PTION ABA	warmed Ox	Ciferen		
	ED INFORMATIO	N ailst	ude la	SOONS	
HAZARD IDEN	TIFICATION _	At Mund	11 and	Den Mare	to Plain
	Ruch	1	7		·
DATE CO	MENT				

4/20

311 determination needed

MID00535830